

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
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37						
38						
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46						
47						
48						
49						
50						
TOTAL IND.	1					
TOTAL DEP.						
TOTAL CLAIMS	1					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

[illegible]

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SERIAL

FILING DATE

APPLICANT(S)

CLAIMS						
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
IND.	DEP.	IND.	DEP.	IND.	DEP.	
101	1					
202	1					
203	2					
204	2					
205	2					
206	2					
207	2					
208	2					
209	2					
210	2					
211	2					
212	2					
213	2					
214	2					
215	2					
216	2					
217	2					
218	2					
219	2					
220	2					
221	2					
222	2					
223	2					
224	2					
225	2					
226	2					
227	2					
228	2					
229	2					
230	2					
231	2					
232	2					
233	2					
234	2					
235	2					
236	2					
237	2					
238	2					
239	2					
240	2					
241	2					
242	2					
243	2					
244	2					
245	2					
246	2					
247	2					
248	2					
249	2					
250	2					
TOTAL IND.	2					
TOTAL DEP.	96					
TOTAL CLAIMS	98					

CLAIMS					
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
IND.	DEP.	IND.	DEP.	IND.	DEP.
251	2				
252	2				
253	1				
254	1				
255	1				
256	1				
257	1				
258	1				
259	1				
260	1				
261	5				
262	5				
263	5				
264	5				
265	5				
266	5				
267	5				
268	5				
269	5				
270	5				
271	5				
272	5				
273	5				
274	1				
275	1				
276	1				
277	1				
278	1				
279	1				
280	1				
281	1				
282	1				
283	1				
284	1				
285	1				
286	1				
287	1				
288	1				
289	1				
290	1				
291	1				
292	1				
293	1				
294	1				
295	12				12
296	12				12
297	12				12
298	12				12
299	12				12
300	12				12
TOTAL IND.	6				12
TOTAL DEP.	80				72
TOTAL CLAIMS	86				84

<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>4</p> <p>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)</p> </div> <div style="width: 55%;"> <p>SERIAL <u>479 995</u> FILING DATE _____</p> <p>APPLICANT(S) _____</p> </div> </div>							
CLAIMS							
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
IND.	DEP.	IND.	DEP.	IND.	DEP.		
301	12	12				351	12
302	12	12				352	12
303	12	12				353	12
304	12	12				354	12
305	12	12				355	12
306	12	12				356	12
307	12	12				357	12
308	12	12				358	6
309	12	12				359	12
310	12	12				360	1
311	12	12				361	1
312	12	12				362	2
313	12	12				363	6
314	12	12				364	6
315	12	12				365	6
316	12	12				366	6
317	12	12				367	6
318	12	12				368	6
319	12	12				369	6
320	12	12				370	6
321	12	12				371	6
322	12	12				372	6
323	12	12				373	6
324	12	12				374	6
325	12	12				375	6
326	12	12				376	6
327	12	12				377	6
328	12	12				378	6
329	12	12				379	6
330	12	12				380	6
331	12	12				381	6
332	12	12				382	6
333	12	12				383	6
334	12	12				384	6
335	12	12				385	6
336	12	12				386	6
337	12	12				387	6
338	12	12				388	6
339	12	12				389	6
340	12	12				390	6
341	12	12				391	6
342	12	12				392	6
343	12	12				393	6
344	12	12				394	6
345	12	12				395	6
346	12	12				396	6
347	12	12				397	6
348	12	12				398	6
349	12	12				399	4
350	12	12				400	4
TOTAL IND.						TOTAL IND.	2
TOTAL DEP.	600	600				TOTAL DEP.	328
TOTAL CLAIMS	600	600				TOTAL CLAIMS	330

AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
IND.	DEP.	IND.	DEP.	IND.	DEP.		
351	12	12				351	12
352	12	12				352	12
353	12	12				353	12
354	12	12				354	12
355	12	12				355	12
356	12	12				356	12
357	12	12				357	12
358	6	6				358	6
359	12	12				359	12
360	1	1				360	1
361	1	1				361	1
362	2	2				362	2
363	6	6				363	6
364	6	6				364	6
365	6	6				365	6
366	6	6				366	6
367	6	6				367	6
368	6	6				368	6
369	6	6				369	6
370	6	6				370	6
371	6	6				371	6
372	6	6				372	6
373	6	6				373	6
374	6	6				374	6
375	6	6				375	6
376	6	6				376	6
377	6	6				377	6
378	6	6				378	6
379	6	6				379	6
380	6	6				380	6
381	6	6				381	6
382	6	6				382	6
383	6	6				383	6
384	6	6				384	6
385	6	6				385	6
386	6	6				386	6
387	6	6				387	6
388	6	6				388	6
389	6	6				389	6
390	6	6				390	6
391	6	6				391	6
392	6	6				392	6
393	6	6				393	6
394	6	6				394	6
395	6	6				395	6
396	6	6				396	6
397	6	6				397	6
398	6	6				398	6
399	4	4				399	4
400	4	4				400	4
TOTAL IND.	2	2				TOTAL IND.	2
TOTAL DEP.	328	35				TOTAL DEP.	35
TOTAL CLAIMS	330	37				TOTAL CLAIMS	37

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FILING DATE

APPLICANT(S)

CLAIMS					
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
IND.	DEP.	IND.	DEP.	IND.	DEP.
401	4	①			
402	4	①			
403	4	①			
404	4	①			
405	2				
406	2	①			
407	2	①			
408	2	①			
409	2	①			
410	2	①			
411	1	1			
412	1	1			
413	1	1			
414	1	1			
415	1	1			
416	1	1			
417	1	1			
418	5	5			
419	2	2			
420	5	5			
421	5	5			
422	5	5			
423	2	2			
424	2	2			
425	2	2			
426	5	5			
427	2	2			
428	5	5			
429	5	5			
430	2	2			
431	2	2			
432	7	7			
433	7	7			
434	5	5			
435	2	2			
436	7	7			
437	7	7			
438	4	4			
439		①			
440		①			
441		12			
442		12			
443		1			
444		1			
445		1			
446		1			
447		1			
448		1			
449		1			
450		1			
TOTAL IND.	7	15			
TOTAL DEP.	108	123			
TOTAL CLAIMS	115	139			

CLAIMS					
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
IND.	DEP.	IND.	DEP.	IND.	DEP.
451	1				
452	1				
453	1				
454	1				
455	1				
456	1				
457	1				
458	1				
459	1				
460	1				
461					
462					
463					
464					
465					
466					
467					
468					
469					
470					
471					
472					
473					
474					
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486					
487					
488					
489					
490					
491					
492					
493					
494					
495					
496					
497					
498					
499					
500					
TOTAL IND.	10				
TOTAL DEP.					
TOTAL CLAIMS	10				